



NO WOMAN LEFT BEHIND IN THE FIGHT AGAINST NON COMMUNICABLE DISEASES
Towards health services that address breast and cervical cancer:
a side event of the 44th Session of the UN ECOSOC Commission on Population and
Development
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Co-sponsored by:
Permanent Mission of the Member States of the Caribbean Community
(CARICOM)
Permanent Mission of the Republic of Malawi
Pan American Health Organization (PAHO)
United Nations Population Fund (UNFA)
In collaboration with American Cancer Society (ACS)
Program for Appropriate Technology in Health (PATH)
Forum of African First Ladies against Breast and Cervical Cancer

Speakers included representatives of CARICOM, UNFA, Forum of African First Ladies, PATH, the UN Mission to Malawi and a Breast cancer Survivor from Jamaica sponsored by the ACS.

This parallel session was held in preparation for the upcoming UN High level meeting on non-communicable diseases (NCDs) scheduled for September 2011, which will generate an outcomes report. Information regarding NCDs, and in particular about cancer of the breast and cervix, was presented.

NCDs represent cancer, diabetes, cardiovascular diseases and chronic respiratory infections and are the leading cause of death worldwide, affecting developing countries disproportionately.

Cancer of the breast and cervix are the number one killers of women per year and approximately 80% occur in the developing world, particularly in Sub Saharan Africa. Cancer of the breast develops 10-15 years earlier than in the developed world and is the leading cause of cancer death in the developing world where screening detection and treatment are not available

Cancer of the cervix is the second leading cause of death. Unlike in breast cancer, there are tools for prevention and early detection but they not available because of poor education, absent infrastructure, expense and lack of trained professionals.

Human papilloma virus (HPV) is responsible for 70% of cases of cervical cancer. The HPV vaccine is 90% effective, if given prior to sexual activity. Three doses of HPV vaccine are required. The vaccine is totally safe and protection lasts for 5 to 8.5 years. Surveillance and screening by visual inspection and Pap test are still required for cervical cancer detection and prevention, particularly in women and girls who were not vaccinated and are sexually active.

The cost of the vaccine is decreasing but is still a major obstacle to its widespread use. HPV DNA self-administered vaginal testing is ideal for developing countries and is being evaluated. Women will need to be educated in its use but it has great potential because of ease of use.

Prevention, early detection and prompt and effective treatment and care have significantly reduced mortality from cancer of the breast and cervix in women in the developed world. The organizations responsible for this session, including the WHO and others, are working to make this treatment and care available in developing countries. Women, families including parents of girls, communities and governments have to be educated regarding prevention, detection and treatment. Resources and financial support need to be made a priority.

If women's lives are to be saved, especially since these cancers strike during the most productive years of their lives and affect not only the patients but also their families and communities, they must have access to cancer prevention, screening and treatment and very importantly to information.

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